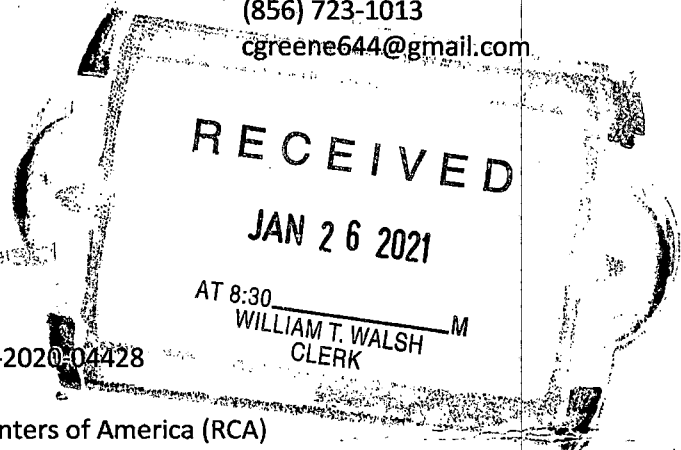


December 15, 2020

U.S. District Court
4th & Cooper Street
Camden, NJ 08101

Re: E.E.O.C. Charge No. 530-2020-04428
Complaint of Discrimination
Complainant v. Recovery Centers of America (RCA)

728 Millbridge Rd.
Clementon, NJ 08021
(856) 723-1013
cgreene644@gmail.com



To Whom It May Concern:

I am submitting a formal complaint of discrimination against the Recovery Centers of America (RCA) based on Title VII, the Americans with Disabilities Act and the Age Discrimination in Employment Act.

Specifically, my complaint of discrimination includes the following:

- I applied for the Clinical Supervisor position advertised on Indeed.com web site.
- I am a 69-year old African American male with a physical disability.
- I was interviewed for the position by Crystal Fabrizio and her colleague.
- I was told that RCA needed a male supervisor.
- I was told that my qualifications, knowledge and experience met job qualifications.
- I worked with co-occurring patients and patients in Medication-assisted Treatment for opioid dependent patients, such as those in treatment at RCA.
- I was available for work within their time frame.
- At the end of the interview, I was asked if I "could keep up with the pace?"

You may contact my attorney regarding this matter. Contact information is listed below.

Sincerely,

Complainant Chad B. Greene II Date 12/15/2020

Attorney information:
Johnny Cocran Law Firm &
Koller Law Firm
2043 Locust St.
Philadelphia, PA 19103
(215)545-8917

Enclosures

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC 530-2020-04428	
NEW JERSEY DIVISION ON CIVIL RIGHTS and EEOC <i>State or local Agency, if any</i>			
Name (indicate Mr., Ms., Mrs.) MR. CHARLES B GREENE		Home Phone (856) 723-1013	Year of Birth 1951
Street Address City, State and ZIP Code 728 MILLBRIDGE, CLEMENTON, NJ 08021			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name RECOVERY CENTERS OF AMERICA		No. Employees, Members 501+	Phone No. (609) 782-0005
Street Address City, State and ZIP Code 5034 ATLANTIC AVENUE, MAYS LANDING, NJ 08330			
Name CRYSTAL FABRIZIO		No. Employees, Members	Phone No. (609) 782-0005
Street Address City, State and ZIP Code 5034 ATLANTIC AVENUE, MAYS LANDING, NJ 08330			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> RETALIATION <input checked="" type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest 03-26-2020 04-06-2020 <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)). <p>I applied for multiple positions with Respondent starting in February of 2020. I was denied on multiple occasions starting with an initial rescinding of my application for a position on February 26th, 2020. For another position, Clinical Supervisor, I was well qualified and I had a great telephone interview. However, when it came time to interview in person, the process seemed to go completely sideways. I was asked by the two interviewing parties, Crystal Fabrizio and Jennifer, if I was able to keep up with the fast pace. This flustered me because I knew a lot of the questions that were directed towards me during this interview were in regard to my race and age. I was also taken aback because the telephone interview had went very well. I was informed on February 26th, 2020, that I was not selected for the position. On April 6th, 2020, I spoke with a friend of mine who informed me that a female was hired by Recovery Centers of America. I have experienced discrimination in hiring on multiple occasions as an African American male above the age of 40.</p> <p>I allege that I was not hired in violation of both Title VII of the Civil Rights Act of 1964, as amended, and the Age Discrimination in Employment Act (ADEA), as amended, because of my race (African American)</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT	
Digitally signed by Charles Greene on 07-08-2020 03:12 PM EDT		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To:

Agency(ies) Charge
No(s):☐ FEPA☒ EEOC**530-2020-04428****NEW JERSEY DIVISION ON CIVIL RIGHTS**

and EEOC

State or local Agency, if any

and my age (69).

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

**Digitally signed by Charles Greene on 07-08-2020 03:12
PM EDT**

NOTARY - *When necessary for State and Local Agency Requirements*

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
(month, day, year)